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CONFIRMATION NO. 5536

<b>SERIAL NUMBER</b> 10/655,543	<b>FILING OR 371(c) DATE</b> 09/03/2003 <b>RULE</b>	<b>CLASS</b> 435	<b>GROUP ART UNIT</b> 1634	<b>ATTORNEY DOCKET NO.</b> 1312.03	
<b>APPLICANTS</b> Donna M. Shattuck, Salt Lake City, UT; Steven Stone, Sandy, UT; ✓ Deanna L. Russell, Salt Lake City, UT; Victor Abkevich, Salt Lake City, UT; Steven Hunt, Salt Lake City, UT;					
<b>** CONTINUING DATA *****</b> ✓ This appln claims benefit of 60/407,817 09/03/2002 ABN and claims benefit of 60/433,074 12/13/2002					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 11/26/2003</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged _____ Examiner's Signature Initials		<b>STATE OR COUNTRY</b> UT	<b>SHEETS DRAWING</b> 1	<b>TOTAL CLAIMS</b> 20	<b>INDEPENDENT CLAIMS</b> 3
<b>ADDRESS</b> 26698					
<b>TITLE</b> OBESITY GENE AND USE THEREOF					
<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		